Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement sot forth in IC 5-2-15-3.

Date: 07-06-2007 Address: 2007-313 Case #: County: Seizure Location (cheek all that apply) Type of Laboratory Seizure (check one) [Hotel/Motel X Residence Coperational Lab 🔀 Open – No Structure Chemical/Glassware/Equipment (only) Outbuilding Other: Vehicle Dumpsite (only) Child under age 14 discovered (check one) Items Found (check all that apply) X Yes / (number present) Lithium/Ammonia Reaction(s) Red Phosphorous/Iodine Reaction(s) No ✓ Flammable Solvents *If yes, fax report to Child Protective Services Water Reactive Metal (Lithium) X Anhydrous Ammonia Hydrochloric Acid Gas Generator(s) A Corrosive Acid Corrosive Base Other: This report is to be faxed to the following agencies that serve the location: INTUZAMS VOLUMBER FOR FOR X12-277-2007 Fire Department MARTIN COUNTY FOX 247-2009
MARTIN COUNTY FOX 247-2316 Health Department: Child Protective Services Department: For further information regarding this methamphetamine laboratory, contact the investigating officer listed below. Investigating Officer: Audy BURKHALOT Phone 812-247-3726

- ** This form is to be fixed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.
- *** This form is to be included with case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.